

Thank you for accepting additional recommendations. I know you are in a tight timeline so I will be brief and can provide more info on any of these at your request.

1. **Research shows that mentor programs can be especially helpful for minorities and women in entering careers not traditional for them, but that if these individuals do not see someone “like them” in a “non-traditional” job before 8th grade, they are unlikely to take necessary training and educational paths.** Schools must provide workforce exposure to children, and non-college track careers must be de-stigmatized in schools. Minorities, persons with disabilities, and women in non-trad careers should be incented in some way to work with youth.
2. **DHR strongly supports increasing apprenticeship opportunities. However, there is ample evidence that minorities and women are not adequately participating in these programs. Racial minorities make up a very small percentage of Iowa’s registered apprentices (have requested this number from DOL), and women are fewer than 3% of apprentices.** Further, there is evidence that many fields continue to be unwelcoming for minorities and females. Any expansion of registered apprenticeship programs should have accountability measures for recruitment and retention of minorities and females. Training should be made available to assist apprenticeship providers in best practices for recruitment and retention, how to create a welcoming work environment, how to manage and avoid conflict related to workplace diversity issues, etc. (ICSW is doing focus group research on women’s perceived barriers toward entering construction, electrical, and utility work that may yield some helpful information.)
3. **Time limits set by various programs (some federal) can be problematic for several special populations.**
 - a. PROMISE JOBS has moved more and more toward getting people to work—in any job—rather than providing assistance and accountability in meaningful job training or education. An individual who starts in a program and has basic literacy, numeracy, or English proficiency problems often cannot address those deficiencies and get through a certification or associate’s degree in two years.
 - b. Refugees who come to Iowa get 60 days of services—period. They face a number of barriers: language, transportation, past trauma and cultural work barriers common to those who may have lived their entire lives in refugee camps. Dropping all services after 60 days creates more expensive problems for the State later.
4. **Wraparound Services to Support Special Populations Access Job Training**
 - a. Access to culturally affirmative mental health services is a crucial priority across every customer population served by the Department of Human Rights. Shortages in services are even more acute when you add in cultural and language barriers our populations face.
 - i. The State should carve out a portion of existing state college student aid that will be available for those pursuing education and training in key skill shortage areas, especially mental health, primary health care, and direct care. (For instance, now, \$54 million per year is allocated to tuition assistance for private and proprietary colleges alone with no accountability as to how the state benefits from this investment. The State could set aside, say a quarter of that, aimed at creating more LISWs and other professionals in acute health care shortage areas. Private colleges could still compete for those students if they have the programs.)
 - b. Mental health jail diversion programs have been shown to be very effective at reducing incarceration rates for non-violent misdemeanants and provide wraparound services that help divertees to stabilize their lives and gain employment. Programs exist in Story and Black Hawk Counties. These programs are far cheaper and more effective than incarcerating persons who are mentally ill and non-violent.
 - c. There is a strong correlation between unplanned pregnancy and poverty. Women with small children at home obviously have a more difficult time and much greater expense to be involved with job training. Currently, 49% of all births in Iowa are to single mothers. For

African Americans, it's 2 out of 3 births. Access to birth control and other pregnancy prevention programming is another key wrap around service.

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